PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

CLAIMS AS FILED - PART I

Application or Docket Number

16816478

(Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			10		00.0.	·		RATE		0H 7			
FOR .			12.			ADER EVERA			FEE	-	RATE	FEE	
FOR					IOMBI	BER EXTRA		SIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			12 minus 20= * 4)	KS 9=		OR	X\$18=		
INDEPENDENT CLAIMS			7 minus 3 = 1				;	X43=		OR	X86=		
ML	JLTIPLE DEPEI	NDENT CLAIM P	RESENT				145=		OR	+290=			
* 11	the difference	in column 1 is	less than zero, enter "0" in column 2			T	OTAL	386	OR	TOTAL			
CLAIMS AS AMENDED - PART II									70		OTHER	THAN	
_		(Column 1)	(Column 2) (Column 3)			Si	MALL	ENTITY	OR	SMALL	ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSI PAID FOR	LY	PRESENT EXTRA	F	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	·×	\$ 9=		OR	X\$18=		
	Independent	*	Minus	###		-	×	43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								,	OR	+290=		
								TOTAL			TOTAL		
		(Column 1)		(Column 2	۱ (د	(Column 3)	ADD	IT. FEE			ADDIT. FEE		
~		CLAIMS		HIGHEST			Ĺ	T	ADDI-	1		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSL PAID FOR	_Y	PRESENT EXTRA	R	ATE	TIONAL FEE		RATE	TIONAL	
	Total	*	Minus	da		= .	×	\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		= .	×	43=			X86=		
1	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT CLA	AIM		11	-		OR			
•								45=		OR	+290=		
								TOTAL T. FEE	<u> </u>	OR ,	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)												· · ·	
AMENDMENT C	`	CLAIMS REMAINING AFTER AMENDMENT	·	HIGHEST NUMBER PREVIOUSL' PAID FOR	Y	PRESENT EXTRA	R/	ATÉ 1	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X	S 9=		OR	X\$18=		
	Independent		Minus	state		=	X/	13=			X86=	V - V -	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<u> </u>			OR	7,002		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=		
**	f the "Highest Nur		OTAL I. FEE		OR ,	TOTAL ODIT. FEE							
1	The "Highest Num	mber Previously Pa ber Previously Paid	io For IN THIS I For (Total or	SPACE is less Independent) is	s than s the h	3, enter "3." ighest number			opriate box				